



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

9584-030-999

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20	20				RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		* 3			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 mi	nus 3 =	*			X42=		OR	X84=	**************************************
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT			Ø		+140=	140	OR	+280=	280
* If	the difference	in column 1 is	less than zero, enter "0" in co			column 2	· L	TOTAL	110	OR OR	TOTAL	
CLAIMS AS AMENDED - PART II										• ' '	OTHER	THAN
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	T CL AIM			X42=		OR	X84=	
<u> </u>	TINOTTHEOL	INTAMON OF MIC	DETTE DEF	CINDEIN	CLATIVI		¹ _	+140=		OR	+280=	
							 ^_	TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM	Ц	¹	+140=		OR	+280=	
							L	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	, , ,	DI1. 1 LL =			ADDII. I'EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=				-
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in solumn 1.												